15,17 19

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									108	nl.	103		
70000809													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR		THAN ENTITY	
TOTAL CLAIMS			19		•			RATE	FEE	7	RATE	. FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FE	€ 385.00	OR	BASIC FEE	770.00	
Ţ	OTAL CHARGE	ABLE CLAIMS	19 minus 20=		· C ·			X\$ 9=		OR	XS18=		
IN	DEPENDENT C	LAIMS	ं ⊄ minus3 ≉		1			X43= 1/9		ОЯ	X86=		
M	ULTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=	1	OR			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	428	OR			
CLAIMS AS AMENDED - PART II										J V	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENTA	21606	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 22	Minus	- 2	20	· 2		25.	60	OR	X\$18=		
	Independent	· 2	Minus		4	= 0		*43=		OR	X86=		
_	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		1	+290=		
. 1 - 1 - 1							į	TOTAL	ļ	OR	TOTAL		
/	12/7/06							ODIT. FEE		OR	ADDIT, FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHI NUME PREVIO PAID F	EST IER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEÈ	
	Total .	. 17	Minus	- 6	22	·B.		XS 9=		OR	X\$18=	1	
	tnoependent	NTATION OF MI	Minus	en (	1	1.00	Γ	X43=		OR	X86=		
	ring) rings	NATION OF MIC	JETH-LE DE	PENDENT	CD-GIM			+145=		OR	+290=		
						•	L	TOTAL DDIT, FEE	1.	OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	n 2)	(Calumn 3)		<b>DD711 L</b> L				1	
≥ [		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus .	••		•	T	X\$ 9=		OR	X\$18=	, .	
	Independent	•	Minus	***		E	+	X43=			X86=		
_	FIRST PRESE	NTATION OF ML	ILTIPLE DE	PENDENT	CLAIM		-	A435		OR	Y80=		
	the entry in cal-	nn 1 is lane there is	, antes la act		0° L		L	+145=		OR	+290=	•	
~ 1	I the "Highest Nun	nn 1 is less than th nber Previously Pa	& For IN THE	S SPACE IS	ess ther	20, enter "20."	AE	TOTAL OIT. FEE		OR ,	TOTAL ODIT, FEE		
1	The "Highest Num	mber Previously Paid ber Previously Paid	o ror in THI I For" (Total o	o orace is Independen	its the	n 3, enter "3." highest number			propriate box				